

10-2601

| POSITION | INITIALS | ID. NO. | DATE |
|---------------------------|----------|---------|----------|
| FEES DETERMINATION | ADD | | 10-01-01 |
| O.I.P.E. CLASSIFIER | | | 10-12-01 |
| FORMALITY REVIEW | SP | 1128 | 10/24/01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|-------|------|
| 1 | ✓ |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

BEST AVAILABLE COPY

953
12-23-01